

APPLICATION INFORMATION

Application number:: New
Filing Date:: New
Application Type:: Regular
CD-ROM or CD-R?:: None
Number of CR disks::
Number of copies of CDs::
Sequence submission?:: None
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: ORGANO PHOSPHATIC FERTILIZER
Attorney Docket Number:: 6013-147US DAT/al
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: None
Total Drawing Sheets:: 14
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Secrecy Order in Parent Appl.?:: No

INVENTOR INFORMATION

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Léon-Étienne
Middle name::
Family name:: Parent
Name Suffix::
City of Residence:: St-Nicolas
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 253, rue des Grives

City:: St-Nicolas
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G7A 3G6

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Suzanne
Middle name::
Family name:: Allaire
Name Suffix::
City of Residence:: Ancienne-Lorette
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 1954, rue St-Exupéry
City:: Ancienne-Lorette
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G2E 4Y1

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Lotfi
Middle name::
Family name:: Khiari
Name Suffix::
City of Residence:: Ste-Foy
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 2629, rue du Mont-Joli
City:: Ste-Foy
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G1V 1C4

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Antoine
Middle name::
Family name:: Karam

Name Suffix::

City of Residence:: Québec
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 1498 boul. La Morille, apt. 202
City:: Québec
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G2K 1P5

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 020988
Phone number:: (514) 845-7126
Fax:: (514) 288-8389
E-Mail Address:: swabey@ogilvyrenault.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 020988

DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

FOREIGN PRIORITY INFORMATION

Country:: Application Number:: Filing Date::

ASSIGNEE INFORMATION

Assignee name:: UNIVERSITÉ LAVAL
Street:: Cité universitaire

City:: Québec
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G1K 7P4